



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4483

SERIAL NUMBER 10/084,759	FILING DATE 02/26/2002 RULE	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. 2972-86588
-----------------------------	---------------------------------------	--------------	------------------------	--------------------------------------

APPLICANTS

Meryl J. Squires, Barrington Hills, IL;

**** CONTINUING DATA *******

This application is a CON of 08/824,041 03/26/1997 PAT 6,350,784
 which is a CIP of 08/646,988 05/08/1996 PAT 6,355,684
 which is a CIP of 08/600,217 02/12/1996 PAT 6,348,503

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **** SMALL ENTITY ****
**** 04/23/2002**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IL	SHEETS DRAWING 0	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 5
---	---	---------------------------	------------------------	-----------------------	----------------------------

Verified and Acknowledged
 Examiner's Signature: *[Signature]* Initials: *[Initials]*

ADDRESS
 24628
 WELSH & KATZ, LTD
 120 S RIVERSIDE PLAZA
 22ND FLOOR
 CHICAGO, IL
 60606

TITLE
 ANTIMICROBIAL PREVENTION AND TREATMENT OF HUMAN IMMUNODEFICIENCY VIRUS AND OTHER
 INFECTIOUS DISEASES

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
------------	---	--

RECEIVED 645	No. _____ for following:	<table border="1"><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
<input type="checkbox"/> 1.18 Fees (Issue)					
<input type="checkbox"/> Other _____					
<input type="checkbox"/> Credit					